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I hereby certify that this Fcc(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or seing facsimile transmitted to the USPTO (571) 273-2885, on the date indicate I below. 02/15/2006 7590 43246 GEAM - SILICONES - 60SI IP LEGAL ONE PLASTICS AVENUE (Depositor's name 000000001 070000 02700<u>012</u> PITTSFIELD, MA 01204, 3697006 CNEGA2 (Signature 1400.00 DA 01 FC:1501 (Date) 300.00 DA 02 FC:1504 9.00 DA FC:8001 CONFIRI IATION NO. ATTORNEY DOCKET NO. FIRST NAMED INVENTOR FILING DATE APPLICATION NO. 1549 SIL-0007-3-DIV Richard W. Cruse 11/09/2001 TITLE OF INVENTION: BLOCKED MERCAPTOSILANE COUPLING AGENTS FOR FILLED RUBBERS 09/986,515 DATE DUE TOTAL FEE(S) DUE PUBLICATION FEE ISSUE FEE SMALL ENTITY APPLN. TYPE 05.15/2006 \$1700 \$300 \$1400 NO nonprovisional CLASS-SUBCLASS ART UNIT EXAMINER 528-044000 1713 EGWIM, KELECHI CHIDI DOMINICK 13 VICAR Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (2) the name of a single firm (having as a member a registered attorncy or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE HENECTABY, NEW YORK ☐ Individual Corporation or other private group entity ☐ Government Please check the appropriate assignce category or categories (will not be printed on the patent): 4b. Payment of Fee(s): 4a. The following fee(s) are enclosed: ☐ A check in the amount of the fec(s) is enclosed. Issue Fee
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